FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



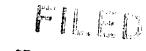
FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000030566 (0)

A PLUS VACUUM CORPORATION



97 JUN 20 MM 7: 47

SECRETARY OF STATE
TALLAHASSEF FLORIDA

A PLUS VACUUM CURPURATION						THE CHIM SOUT FLORIDA			
11									
Principal Plac	e of Business	Mailing Address	 `				#0140 41111 40401 0441 8 1	EIRIÐ BAIR AÐ 🛭	
849 EAST 49TH HIALEAH FL 33	+ STREET	349 EAST 49TH	349 EAST 49TH STREET HIALEAH FL 33013-1856						
						3. Date Incorporated or Qualified 04/19/1995	3a. Date of Las		
2. Principal P	Place of Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number	<u>' </u>	Applied For	
21		26	26			APPLIED FOR 65-0684461 Not Applicable			
Suite, Apt. #, etc.		Suite, Apt. #	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional	
22		27					Feo	Required	
City & State		City & State				6. Election Campaign Financing		00 May Be	
23 Zip	Zip Country		Zip Country			Trust Fund Contribution L. Added to Fees			
24	han		· у		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
<u> </u>	25 29 29 29 29 29 29 29 29 29 29 29 29 29				1	10. Name and Address of New Registered Agent			
YAN	ES, NESTOR		8	1 Nam	ne				
	EAST 49TH STREET				- A - L - L	(D.C. D. Al			
	EAH FL 33013		82		at Address (P.O. Box Number is Not Acceptable)				
_			8	3		· · · · · · · · · · · · · · · · · · ·			
•			8	A Cau			1051 7	Zio Codo	
			ľ	' '			FL	Zip Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607.1508, Flori	da Statutes, the abo	ve-name	ed corpor	ation submits this statement for the pun's board of directors. I hereby accep	rpose of changin	g its registered	
agent La	registered agent, or both, in the S im fam iliar with, and accopt the of	itate of Florida, Such char bligations of, Section 607	nge was authorized .0505, Florida Statut	oy ine ço es.	orporation	is board of directors. Thereby accep	, the appointment	as registered	
SIGNATURE								ļ	
	Signature, typod or printed name of registere		(NOTE Hegisterca A	gent signat	lurc required		DATE		
12.	PD	AND DIRECTORS	13.		VS.	ADDITIONS/CHANGES TO OFFICE	EHS AND DIRECT		
TITLE NAME	YANES, NESTOR	L 1/1	1.2 NAM			REZ AYMEE	Chang	ac T vanition	
1	349 EAST 49TH STREET						y-		
STREET ADDRESS	HIALEAH FL 33013			E1 ADDRES:	יוער (s	9 EAST 49 STREE.	•		
CITY-ST-ZIP TITLE	VSTD	D	1.4 CITY ELETE 2.1 1/TLE			12244 12 33013	Chang	ge Addition	
NAME	FERREIRO, ALFREDO	~ ~	2.2 NAM			1000022	21341	Î — — — —	
STREET ADDRESS	349 EAST 49TH STREET			: ET ADDRES!	c	-06/24/9701058014		-∩14	
CITY-ST-ZIP	HIALEAH FL 33013			- \$1 - 2IP	3	****165	.00 ****	165.00	
TITLE		IQ 🔲					Chang		
NAME			3.2 NAM				-		
STREET ADDRESS				Et addres:	s				
CITY-ST-ZIP			3.4. CITY						
TITLE		Di					☐ Chang	ge 🔲 Addition	
NAME			4. 2 NAM	£					
STREET ADORESS			4.3 STRE	ET ADDRESS	s				
CITY-ST-ZIP			4.4 011 Y	S1-ZIP					
TITLE		□ DI	ELETE 5.1 TOLE				Chang	ge Addition	
NAME			5.2 NAM	_					
STREET ADDRESS			5.3 STRE	ET ADDRESS	s				
CITY - ST - ZIP			5 4 CITY						
TITLE		DI	ELETE 61 TITLE		1		☐ Chang	ge 🔲 Addition	
NAME			6.2 NAM	-					
STREET ADDRESS			6.3 STRE	ET ADDRESS	s				
CITY - ST - ZIP			6 4 CITY	ST-ZIP					

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each that my name an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or an an attachment with an address.

4-26-97 (30) 826-6602

CR2E034 (9/96